

Federal Victims of Crime Act (VOCA) Statistical Performance Report Fiscal Year 2008

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All statistics must represent services provided only by persons funded by VOCA dollars or VOCA matching contributions.

VOCA QUARTERLY STATISTICAL PERFORMANCE REPORT INSTRUCTIONS

SECTION 1: TOTAL PRIMARY VICTIMS AND SIGNIFICANT OTHERS SERVED

Directions: In the appropriate categories, indicate the total number of primary victims and significant others who received DIRECT services by the VOCA funded project during the quarter. **Each client may be counted only once.**

Individuals who indirectly benefited from a service performed on behalf of a primary victim may not be counted on this statistical report. For example, VOCA funded staff may assist a woman in obtaining a protective order and she would be counted as a primary victim. Unless her children receive direct services from VOCA supported staff; they should not be counted as victims or significant others.

DEFINITIONS

- **A. NEW CLIENTS** A client is new if he/she has not previously received services from your program. If an ongoing client is re-victimized by a different perpetrator or victimized by a different crime, they should be counted as a new client.
- 1. **New Face-to-Face:** Includes any face-to-face client who is being seen by VOCA staff for the first time this quarter. Do not include new clients where the only method of contact was by telephone/hotline. If an ongoing client is re-victimized by a different perpetrator or victimized by a different crime, they should be counted as a new client.
- 2. **New Hotline/Telephone:** Includes any new client who received services solely over the hotline/telephone for the first time this quarter. This does not include an initial intake call to set up a face-to-face.
- **B.** ONGOING CLIENTS A client is ongoing if she/he has previously received services during the current fiscal year or previous fiscal years for the same crime by the same perpetrator. Aside from first contacts, Domestic Violence clients should be considered ongoing if the same perpetrator is involved.
- 1. **Ongoing Face-to-Face:** Includes any face-to-face client who received services during this quarter, as well as in any previous quarter. Do not include new clients where the only method of contact was by telephone/hotline.
- 2. **Ongoing Hotline/Telephone:** Includes any client who received services solely over the hotline/telephone this quarter and in any previous quarter during the current fiscal year. The only contact with the client is via telephone.
 - PLEASE NOTE Clients should be counted as a new client once, regardless of fiscal years.

SECTION 2: Victims Served by Type of Service (all new and ongoing clients)

Directions: In the appropriate category, indicate the number of new and ongoing VICTIMS and Significant Others that received each service during the quarter. You are counting the number of victims who received a service, NOT the number of times a service was provided. Be sure to consider all services provided to the victim. For example, VOCA staff may have provided information and referral, assistance with victim compensation benefits, and advocacy to one victim: You should include that person in your total *for each category.*

DEFINITIONS

- Counseling refers to in-person crisis intervention, emotional support, and guidance and counseling provided by advocates, counselors, mental health professionals, or peers. Such counseling may occur at the scene of the crime, immediately after a crime, or be provided on an ongoing basis.
- 2. **Follow-Up** refers to in-person contacts, telephone contacts, and written communications, including e-mail, with victims to offer emotional support, provide empathetic listening, check on a victim's progress, etc. (Not to be confused with #1.)
- 3. **Hotline/Telephone Counseling** includes any services provided to a client over a hotline/telephone.
- 4. **Therapy** refers to intensive professional psychological and/or psychiatric treatment. This includes the evaluation of mental health needs, as well as the actual delivery of psychotherapy.
- 5. **Group Treatment/Support -** refers to the coordination and provision of supportive group activities and includes self-help, peer, social support, etc. Include Community Crisis Response here. **Report the number of participants in each group session provided this reporting period. Do not count the same participant twice.**
- Shelter/Safe Home refers to offering short and long term housing and related support services to victims and families following victimization. Count each VOCA client receiving shelter during this reporting period.
- 7. **Assistance with Victim Compensation** includes any information, assistance or advocacy provided for clients regarding the availability of victim compensation. If information is offered, but the client chooses not to apply, include this in your statistics anyway. The provider did inform the client of the resource.
- 8. **Criminal Justice Support/Advocacy** refers to support or advocacy provided to clients at any stage of the criminal justice process, including post-sentencing services and support.
- 9. **Emergency Legal Advocacy** refers to filing temporary restraining orders, injunctions, and other protective orders, elder abuse petitions, and child abuse petitions but does *not* include criminal prosecution or the employment of attorneys for non-emergency purposes, such as custody disputes, civil disputes, etc.
- 10. **Medical Advocacy** includes advocacy performed on behalf of a client in a medical setting or when dealing with medical personnel, or a direct service such as a medical evaluation.
- 11. **Personal Advocacy** refers to assisting victims in securing rights, remedies, and services from other agencies; *locating emergency financial assistance*, intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurance programs including workman's compensation, unemployment benefits, welfare, etc., accompanying a victim to the hospital (not to be confused with #10).
- 12. **Emergency Financial Assistance** refers to *cash outlays* paid for by VOCA for transportation, food, clothing, emergency housing, etc. (not to be confused with # 11).
- 13. **Information and Referral (in-person)** refers to in-person contacts with victims during which time services and available support are identified.
- 14. **Information and Referral (telephone and e-mail)** refers to contacts with victims during which time services and available support are identified. *This does not include calls during which counseling is the primary function of the telephone call.*
- 15. **Other** refers to other **VOCA allowable** services and activities not listed. In the space provided, please specify what services were provided to or received by the client.

SECTION 3: REFERRALS MADE AND RECEIVED (all new clients, and ongoing clients for referrals made)

Directions: Indicate on this page the number of referrals VOCA staff made to other programs/agencies and the number of referrals your program received from other agencies during the quarter. If clients were referred to more than one agency, count each referral made. Referrals received are only counted once for all clients.

DEFINITIONS

- 1. **Self/Family/Friend**: Includes any instances where the client has referred self or when they have been referred to the agency by a family member or friend.
- Non-VOCA Staff Within Agency: Referrals to or from staff within the agency who are not VOCA funded, match or project volunteers (inter-agency referrals).
- 3. **Police**: Referrals to or from a law enforcement organization including local or state police, MDC police or the FBI.
- 4. **Victim Witness Assistance Program**: Referrals to or from victim assistance programs in any of the District Attorney's offices throughout Massachusetts and the Attorney General's Office or U.S. Attorney's Office. Also includes referrals to and from Post-conviction Victim Service Units such as the Parole Board, the Criminal History Systems Board, County Correctional Facilities and Dept. of Youth Services.
- 5. **Court Personnel**: Referrals to or from any court personnel such as judges, clerks, probation officers, etc.
- 6. **Legal Services**: Referrals to or from any legal services including attorneys, law firms, legal aid and/or advocacy organizations, etc.
- 7. **Victim Compensation**: Referrals to or from the Attorney General's Victim Compensation and Assistance Division.
- 8. **VWAB/MOVA**: Referrals to or from the Victim and Witness Assistance Board or its Executive Office staff at the Massachusetts Office for Victim Assistance.
- 9. **Shelter/Safe Home**: Referrals to or from shelters or safe homes outside of your agency.
- Social Services: Referrals to or from any social or human service agencies, such as DSS.
- 11. **Mental Health Agency/Facility**: Referrals to or from any outpatient, in-patient or residential mental health agency/facility.
- 12. **Other Victim Services**: Referrals to or from any agency, program, or advocacy group that specializes in serving victims of crime, if not previously reported in #'s 10 or 11.
- 13. **Medical Services**: Referrals to or from any type of medical services including physicians, clinics, etc.
- 14. **Substance Abuse Programs**: Referrals to or from any type of substance abuse programs or services, including in-patient, outpatient, Alcoholics anonymous, Narcotics Anonymous.
- 15. **Schools:** Referrals to or from any school setting including pre-school through college/university.
- 16. **Community Organizations:** Referrals to community organizations (non-victim service related) such as a YMCA, neighborhood association, homeless assistance organization, career center, etc.
- 17. **Faith-based Organizations**: Referrals to or from churches, synagogues, clergy, or any other organization with religious/spiritual affiliation.
- 18. **Program Outreach/Media**: Referrals received specifically as a result of public service announcements, media advertising, presentations to community groups, etc.
- 19. **Brochure**: Referrals received as a result of brochures printed and distributed by the VOCA programs.
- 20. Other: Includes any referrals made or received that do not fit into any of the above categories.
- 21. Not Known: Use only if you do not know how a client was referred to your agency/program.

SECTION 4: VICTIMS SERVED BY TYPE OF CRIME (new clients or clients with newly disclosed crimes only)

Directions: In the appropriate category, indicate the number of clients served (by gender) for each victimization during the quarter. You are counting the number of victims served for a particular crime, NOT the crime itself. If the client is a victim of multiple crimes, please count the client under each of the crimes disclosed to you, if the crimes are relevant to the service you are providing.

DEFINITIONS

- 1. **Homicide** refers to all types of homicide, except vehicular. "Homicide Survivor" is defined as a family member, loved one, or friend (primary victim) of a person who has been the victim of a homicide. A witness to a homicide is also a primary victim. This category may also include individuals served who are affected by the homicide but do not meet the definition, such as community members: e.g., a student received services after another student, who was not a friend, was murdered (significant other).
- 2. **Motor Vehicular Homicide** refers to all cases of vehicular homicide. See definitions in #1 above with regard to primary victims and significant others.
- Assault refers to all types of assault excluding battery. Do not count this crime as assault if the crime is counted as domestic violence, child physical or sexual abuse, elder abuse and abuse of disabled persons.
- 3. **Robbery** refers to illegal taking of money or property from a person against one's will by either force, intimidation, or in one's absence.
- 4. **Domestic Violence** refers to coercive behavior which may include physical and sexual assaults; threats; insults; intimidation and economic deprivation aimed at gaining and maintaining power and control of the mind, body, and overall lifestyle of an intimate partner.
- 6. **Adult Sexual Assault/Abuse** refers to instances of completed rape, attempted rape or forced sexual contact made against an adult individual. Acquaintance or date rape should be included in this category. Also includes incidence of non-physical assault such as sexual threats or verbal attacks.
- Adult Survivor of Incest or Child Sexual Assault refers to sexual assault committed against an
 individual who is now 18 years or older and receiving services, but who was under age 18 at the time of the
 assault.
- 8. **Adult Survivor of Child Physical Abuse** refers to physical abuse committed against an individual when they were under the age of 18, but are now 18 years or older and receiving services.
- Child Sexual Assault/Abuse refers to incest or sexual assault (completed rape, attempted rape, forced sexual contact) of a child under the age of 18 and who is under age 18 when receiving services. Teen dating violence is included in this category.
- 10. **Child Physical Abuse** refers to physical or emotional abuse/neglect or other child victimization, including child witness to violence, committed against a child under the age of 18.
- 11. **Abuse of Disabled Persons** refers to physical or emotional abuse/neglect inflicted by a family member or caretaker against an individual with disabilities.
- 12. **Elder Abuse (ages 60 +)** refers to physical or emotional abuse/neglect inflicted by a family member or caretaker against an individual age 60 or older.
- 13. **Violation of a Protective Order -** refers to a violation of an active protective order (209A) by the defendant who knew about the protective order and its conditions.
- 14. **Driving Under the Influence/Reckless Driving** refers to a crime which has been committed as a result of drunk or reckless driving. This does not include cases of vehicular homicide.
- 15. **Hate Motivated Crime** refers to crimes committed against individuals or groups, such as assault, sexual assault, threats, and harassment, on the basis of gender, race, religion, disability, national origin or sexual orientation.
- 16. **Political Trauma** refers to crimes committed against individuals or groups on the basis of their political beliefs or actions. This may include physical violence, torture, mutilation, assault and sexual assault.
- 17. **Other** refers to any crime(s) not listed above. Please specify the crime in the space provided.

SECTION 5: CIVIL RIGHTS COMPLIANCE (new clients only) *

A. AGE

Directions: In this section, please note the age of the client. Each quarter, report for all new clients. Please make every effort to gather this data for every client.

B. DISABILITY

Directions: In the appropriate category, note whether the client is physically or mentally disabled/impaired. The definition of disability includes any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological; musculoskeletal; or any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

Each quarter, this information is required for new clients, or for clients for whom a disability/impairment was not previously reported. It is also important that disabilities not visible or readily apparent (e.g. epilepsy, hearing impairment, auditory impairment) be counted. The information a client provides will assist you in providing appropriate services to them.

C. GENDER

Directions: In this section, please note the gender of the client. Each quarter, report for all new clients. All data reported should be based on a client's self-identification of her/his gender. Please refer to the following definitions which were adapted from SAFEPLAN definitions of terms and developed based on the resource, "Shelter/Housing for GLBT Victims of Domestic Violence, GLBT Domestic Violence Coalition and Jane Doe, Inc., October, 2005.":

Female: A person who identifies as female at the time of service.

Male: A person who identifies as male at the time of service.

<u>Transgender</u>, <u>Female to Male (FTM)</u>: A person who is transitioning or has transitioned from female to male, or expresses themselves outside of the gender binary system of male and female.

<u>Transgender, Male to Female (MTF)</u>: A person who is transitioning or has transitioned from male to female, or expresses themselves outside of the gender binary system of male and female.

<u>Transgender, Unknown</u>: A person who has identified as transitioning or has transitioned from one gender to another or expresses themselves outside the gender binary system of male and female, but has not disclosed further information regarding this transition.

<u>Unknown</u>: A person who has not identified their gender.

D. RACE/ETHNICITY

Directions: Each quarter, in the appropriate category, note the race/ethnicity of all new clients. Please make every effort to obtain this information. The information they provide will assist you in providing any culturally sensitive services to the client. To begin,

- Ask the client if they identify as Hispanic/Latino. If yes, include them in Section 5D of the statistical
 performance report under "Hispanic/Latino". If the client does not provide this information, report it as
 "unknown".
- Regardless of the client's answer, complete the section for "Race" for all clients.
- The client data worksheet allows you to capture a client's self-identified ethnicity. This is optional information to report. If you choose to report this information, include a list of all identified ethnicities with your submitted quarterly statistical report. Be sure to include the name of your agency and program on this list.

Following are the Federal Race/Ethnicity Reporting Guidelines and Definitions:

Excerpted from:

PROVISIONAL GUIDANCE ON THE IMPLEMENTATION OF THE 1997 STANDARDS FOR FEDERAL DATA ON RACE AND ETHNICITY

Tabulation Working Group, Interagency Committee for the Review of Standards for Data on Race and Ethnicity. December 15, 2000

http://www.whitehouse.gov/omb/inforeg/r_and_e_guidance2000update.pdf

On October 30, 1997, the Office of Management and Budget (OMB) published "Standards for Maintaining, Collecting, and Presenting Federal Data on Race and Ethnicity" (*Federal Register*, 62 FR 58781 - 58790). The 1997 standards reflect a change in data collection policy, making it possible for Federal agencies to collect information that reflects the increasing diversity of our Nation's population stemming from growth in interracial marriages and immigration. Under the new policy, agencies are now required to offer respondents the option of selecting one or more of the following five racial categories included in the 1997 standards:

- American Indian or Alaska Native A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- <u>Asian</u> A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- <u>Black or African American</u> A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."
- Native Hawaiian or Other Pacific Islander A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

These five categories are the minimum set for data on race for Federal statistics, program administrative reporting, and civil rights compliance reporting.

With respect to ethnicity, the standards provide for the collection of data on whether or not a person is of "Hispanic or Latino" culture or origin. (The standards do not permit a multiple response that would indicate an ethnic heritage that is both "Hispanic or Latino" and "Not Hispanic or Latino.") This category is defined as follows:

■ **Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term, "Spanish origin," can be used in addition to "Hispanic or Latino."

MOVA has also included a category for Multiracial which should be chosen when a client identifies as more than one of the above categories.

Please note: The total for each civil rights category should equal the total number of "New Clients" (as documented in Section 1A.)

*The federal government requires this information for monitoring civil rights compliance.

SECTION 6: TRAINING

A. TRAINING RECEIVED

Directions: In this section, note the number of hours of training received by VOCA paid, match and unpaid/volunteer victim services staff for the quarter. Please specify the content of the training received. Use additional space if necessary.

B. IN-SERVICE/OUTREACH

Directions: In this section, please note in the appropriate category, the number of hours of in-service/outreach by VOCA paid, match and unpaid/volunteer victim services staff. Please specify the content of the in-service/outreach in the column provided.

SECTION 7: PROGRAM UPDATE

Directions:

In this section please explain any program updates or changes regarding your VOCA funded staff, VOCA Program, and fiscal management of the VOCA Program during the past quarter.

STAFFING: When informing our office of staffing changes, it is required that you submit a Programmatic Change form to MOVA within <u>two weeks</u> of a resignation or hire. Attach a resume to the Programmatic Change form for all newly hired staff paid with VOCA funds and/or matching funds. If you do not have a copy of this form, please contact a VOCA staff member. This form informs our office of resignations, hires or internal changes in responsibilities of VOCA funded direct service staff, Executive Director, Chief Financial Officer/Business Manager, and/or administrative support staff.

PROGRAM: Please explain if direct services were not provided or were provided at a reduced level due to changes in staff, or for other reasons. Report any change in facility/location of the agency. Also, please include a complete list of board members, if there have been any changes.

FISCAL: Please submit a separate written request for any budget change to the attention of the VOCA **Program Manager, for approval.** This request must be submitted **prior** to <u>any</u> budget change. Of the total VOCA award, 5% of the budget may be shifted in a fiscal year only upon MOVA's approval.

SECTION 8: NARRATIVE FOR STATE PERFORMANCE REPORT TO OVC

Directions:

In this section, answer the seven questions posed, for the quarter. This information will contribute to the annual report submitted to the Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice.

Please be sure to include any direct quotes from clients that were served,. It is helpful to have victims voices represented in this report. However, please do not include any information that might directly identify the victim.

Thank you for completing this report in a timely and accurate manner.

Please return the completed report to the attention of Daniel Cooper, VOCA/DDTF Program Manager. Please e-mail the report to: Daniel.Cooper@state.ma.us

If you are unable to email the report, please send a copy to: Daniel Cooper, VOCA/DDTF Program Manager Massachusetts Office for Victim Assistance One Ashburton Place, Room 1101 Boston, MA 02108